



PTO/SB/30 (10/2001)

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	09/706,431
Filing Date	November 3, 2000
First Named Inventor	Jay S. WALKER
Art Unit	3713
Examiner Name	Julie K. Brockett
Attorney Docket Number	97-169-C1

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR §1.114**a. ☐ Previously submittedi. ☐ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____iii. ☐ Other _____b. ☒ Enclosedi. ☐ Amendment/Replyiii. ☒ Information Disclosure Statement (IDS)ii. ☐ Affidavit(s)/Declaration(s)iv. ☒ Other PTO Form-1449 and reference cited therein2. **Miscellaneous**a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months (Period of suspension shall not exceed 3 months; Fee under 37 CFR §1.17(i) required)b. ☐ Other _____3. **Fees**

The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-0271i. ☒ RCE fee required under 37 CFR §1.17(e)ii. ☐ Extension of time fee (37 CFR §§1.136 and 1.17)iii. ☐ Other _____b. ☐ Check in the amount of \$ _____ enclosedc. ☐ Payment by credit card (Form PTO-2038 enclosed)**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print / Type)

Michael D. Downs

Registration No. (Attorney / Agent)

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Signature

Michael D. Downs

Date

November 4, 2002

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark

Name (Print / Type)

Michael D. Brinton

Signature

Michael D. Brinton

Date

November 4, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.